

ISSUE: UP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HA	336	8/10
O.I.P.E. CLASSIFIER		59	8/13
FORMALITY REVIEW	WMB	48831	9-2-98

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
Final	
Original	
51	10/17/01
52	3/13/02
53	1/27/02
54	7/11/03
55	12/19/03
56	6/9/04
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Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

Best Available